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Comprehensive HIV Prevention Messages for Young People

HIV-related illness and death now have the greatest impact on young people. AIDS is a leading cause of death among Americans 25- to 44-years-old. In this same age group, AIDS now accounts on average for 1 in every 3 deaths among African-American men and 1 in 5 deaths in African-American women. Between 1990 and 1995, AIDS incidence among people 13- to 25- years-old rose nearly 20%. While AIDS incidence among both young gay and bisexual men and young injecting drug users was relatively constant during this time period, AIDS incidence among young heterosexual men and women rose more than 130%.

A study by the National Cancer Institute, confirms existing data which reveal that as each generation comes of age, there is a substantial increase in the rate of infection as individuals enter their late teens and early twenties, with infection rates peaking in the mid-to-late twenties. Sustained, targeted prevention for each group entering young adulthood is what will keep these waves from developing. As the lead federal agency for HIV prevention, CDC is responsible for implementing public education programs to help stop the spread of HIV and other sexually transmitted diseases (STDs).

A Balance of Prevention Messages is Needed--Including Abstinence and Condom Use

Behavioral science has shown that a balance of prevention messages is important for young people. Total abstinence from sexual activity is the only sure way to prevent sexual transmission of HIV infection. Despite all efforts, some young people may still engage in sexual intercourse that puts them at risk for HIV and other STDs. For these individuals, the correct and consistent use of latex condoms has been shown to be highly effective in preventing the transmission of HIV and other STDs. Data clearly show that many young people are sexually active and that they are placing themselves and their partners at risk for infection with HIV and other STDs. These young people must be provided the skills and support they need to protect themselves.

Public Opinion on the Need for Comprehensive Messages

It is clear that the majority of Americans want strong prevention messages that include information on condom use. A 1995 Public Opinion Poll by Chilton Research found that nearly 80 percent of Americans believe information on condoms should be aired on television. Yet, there will always be groups or individuals who feel strongly about any materials that discuss sexual behaviors. The impact of HIV education and prevention programs on the sexual activity of young people has therefore been a subject of continued debate and scientific inquiry.

Findings from Scientific Reviews

The studies to date vary in scope, quality of design, level of peer-review, age group studied, and type of prevention or education program evaluated, and it is difficult to draw definitive conclusions based on any one study alone.

World Health Organization Review

- With these limitations in mind, the World Health Organization (WHO) has conducted comprehensive reviews of the scientific literature on sex and AIDS education. In 1993, at the 9th International Conference on AIDS, WHO presented a review of 19 studies that considered the effect of sex education on reported age at first intercourse and on reported levels of sexual activity and found several clear trends:
 - There was *no evidence* of sex education leading to earlier or increased sexual activity in the young people who were exposed to it.
 - In fact, six studies showed that sex education lead either to a *delay* in the onset of sexual activity or to a *decrease* in overall sexual activity.
 - Ten studies showed that education programs increased safer sex practices among young people who were already sexually active.

- In addition to the evaluation of school-based education programs, the WHO report concluded that the two public information programs evaluated showed *no effect* on age at first intercourse and *no increase* in sexual activity in young people, despite a large increase in the use of condoms and contraception.

- Later in 1993, WHO published a more extensive review of 35 studies dating back to the 1970s. The overwhelming majority of studies over time, despite various methodologies and country of study, found no evidence that sex education encourages sexual experimentation or increased activity. If any effect was observed, it was virtually always *delayed* sexual intercourse or *increased* effective use of contraceptives, including condoms. There were two studies with findings that varied from these trends. While neither study can prove cause and effect, one study found that an “abstinence only” program increased the level of sexual activity in young people, and another study reported an association between sex education and increased sexual activity. However, the latter study found that variables other than sex education may have related more strongly to the increase in sexual activity.

Office of Technology Assessment Review

- In September 1995, the Office of Technology Assessment (OTA), at the request of the 103rd Congress, examined the effectiveness of prevention programs and found no scientific evidence that curricula focusing only on abstinence delay the onset of sexual intercourse. The report further concludes that programs that include discussions of abstinence and contraception in combination with other topics such as resistance skills, do not lead to earlier initiation of sex, and in fact, result in lowered incidence of sexual intercourse in some cases.

- The OTA report further concluded that among individuals already sexually active, these programs lead to fewer sexual partners and greater use of contraception. This report underscores the need for comprehensive programs and a balance of prevention messages.

These studies primarily looked at school-based education programs designed for adolescents. The findings indicate that sexual activity among young people decreased or remained the same after exposure to sexual health information that included discussions about condom use. The

conclusions do provide some indication of the potential impact of HIV prevention messages delivered within a comprehensive program.

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